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COMMITTEE ON THE RIGHTS OF THE CHILD

Twenty-third session

SUMMARY RECORD OF THE 604th MEETING

Held at the Palais des Nations, Geneva,
on Thursday, 20 January 2000, at 3 p.m.

Chairperson: Mrs. OUEDRAOGO

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GE.00-40458 (E)

The meeting was called to order at 3 p.m.

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 6) (continued)

Initial report of Armenia (CRC/C/28/Add.9); (CRC/C/Q/ARM.1; Written replies of the Government of Armenia to the questions on the list of issues, document without a symbol distributed in the meeting room) (continued)

1. At the invitation of the Chairperson, the members of the delegation of Armenia resumed their places at the Committee table.

2. Mr. KAZHOYAN (Armenia) said that acts of violence against children were punished under the Penal Code and Civil Code, but were not covered in a specific legislative text. Although no cases of ill-treatment had been brought to the authorities' attention so far, they would not hesitate to develop appropriate provisions if such a need were to arise.

3. Some 98 per cent of births took place in hospitals and were entered in the civil register. The proportion of women who preferred to give birth at home, either for financial reasons or out of personal preference, was very low. Cases where financial difficulties drove families to hand their children over to specialized institutions were rare, but when such cases arose the children most often returned to their families once the situation improved. However, the number of children living away from their families was on the increase in Armenia and the authorities were aware of that trend.

4. Lastly, children in schools took part in decisions concerning them.

5. The CHAIRPERSON invited the members of the Committee to ask the Armenian delegation questions on health, education and leisure.

6. Mrs. RILANTONO asked for further information on the means used to correct food deficiencies among pregnant women, given that anaemia during pregnancy was an important factor in infant mortality. She noted with appreciation that breastfeeding was widespread and encouraged in the country. On the other hand, the statistics on the numbers of teenage pregnancies, maternal mortality and the abortion rate were disturbing. It would be useful to know what the family planning policy was, and whether partial privatization of health services was being considered given the threat which the current economic difficulties posed to the free health-care services provided by the public health system.

7. Mrs. MOKHUANE requested additional information on the means used to guarantee proper nutrition for Armenian children. She asked whether information was distributed about contraception, as there appeared to be excessive recourse to abortion. Were the authorities thinking of launching a campaign on prevention of sexually transmitted diseases? What social benefits - such as sickness insurance - were provided for the unemployed and the most disadvantaged people? How was dental care paid for?

8. She would like to know how the Government intended to counteract the negative effects of environmental pollution on children's health, which measures it generally used to promote health and whether there were specific measures covering teenage health.

9. Mr. RABAH asked whether there was a control mechanism for the specialized structures which cared for children who had no family and whether NGOs played a role in managing them. In addition, would it be possible to obtain figures on the number of children living and working in the street, on children's actual work situation and on the school drop-out rate in Armenia?

10. Mrs. SARDENBERG asked for confirmation of the Government's stated intention to accede to the 1993 Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption.

11. The fact that there was no de jure discrimination in Armenia - as the legislation prohibited all forms of discrimination - unfortunately did not mean that no de facto discrimination against children existed. The authorities should, in particular, look into the discriminatory treatment received by girls in a number of spheres.

12. The current trend - also noted in Armenia - was to integrate disabled children into the normal school structures, but it was essential for such a policy to be backed by the appropriate funding. There were nearly 10,000 disabled children living in specialized institutions, and it was alarming to note that more and more children from severely disadvantaged families were being accommodated by such structures. In that connection, was it true that half of the Armenian population was living in poverty? What was the situation regarding the closing of numerous children's homes as a result of the structural adjustment policy followed by the country? Lastly, she urged the Armenian authorities to establish a body to which abused children could turn for help.

13. Mr. DOEK asked whether measures were being planned to address the ignorant about health matters of children leaving school. Some 70 per cent of abortions, a disturbing proportion of which involved minors, were allegedly performed illegally. Could the delegation provide clarifications in that regard? How did the Government intend to combat the increase in sexually transmitted diseases?

14. The situation with regard to education was extremely disturbing: school attendance had decreased sharply, the school drop-out rate was on the rise and teachers were extremely badly paid. Armenia having signed an agreement with the World Bank concerning a loan to run through 2001, was the Government considering requesting aid from other international bodies such as UNICEF or UNESCO? The increase in the number of street children was alarming, accompanied as it was by a rise in crime. Was it true that children were forcibly enrolled in the army? If so, how old were such children and how did the Government plan to put an end to that situation?

15. Given that there was no specific legislation or special court for juvenile offenders, he asked what was the difference of treatment between children under 16 and over 16, which was the age of criminal responsibility, whether the Penal Code applied to minors in the same way as

adults and how juvenile offenders under 14 were treated. Did minors receive specific legal assistance? Did social welfare organizations have free access to prisons, especially rehabilitation camps? Was there a recourse procedure for ill-treatment?

The meeting was suspended at 3.40 p.m. and resumed at 3.50 p.m.

16. Mr. MARTIROSSIAN (Armenia) said that the Government had set up a system for accommodating homeless children who were without families or who had a physical or mental disability. Since the break-up of the Soviet Union, NGOs had provided assistance in establishing care institutions. As they lacked funds, charitable organizations assisted them through donations of food clothing and equipment. Such institutions would not be closed until a new system had been put in place, as the State was the institution primarily responsible for the care of such children.

17. Street children represented a new problem, of limited scope, in Armenia. With the participation of UNICEF, the Government had launched a project aimed at reintegrating homeless children into the school system through the services of social workers. Concerning crime by street children, the objective was to return the children to their families or place them in a children's home as soon as possible, to avoid punishment exposing them to even more harmful influences.

18. In the framework of the new juvenile justice system, one body was in charge of children under 14 who had committed offences. The school and the local authorities worked together in that area.

19. He agreed that there was a nutrition problem in Armenia, especially concerning children. Various international organizations were helping to launch awareness-raising campaigns and ensure that the population, especially young children, received proper nutrition.

20. There was as yet no family planning policy in Armenia; however, the abortion rate was very low. With regard to sickness insurance, before the break-up of the Soviet Union health-care costs had been borne by the State, but large-scale changes and reforms had taken place since then and a system of paid health care had been added to the public system. The Government was planning reforms, in particular the establishment, within the current year, of interministerial working groups in charge of preparing draft legislation. Armenia intended to enact the required laws and mechanisms in that area, based on the systems used in other countries, but its poor economic situation did not give much cause for hope in the next few years.

21. Schoolchildren continued to receive classes in basic health care, and the Government was providing support to schools in a difficult financial situation, with assistance from IMF.

22. Maternity care was in principle free of charge. The Government had resources in that area, even if doctors' salaries were low. However, maternity care did occasionally have to be dispensed on a paid basis. A system had recently been introduced whereby free medical care (funded through the national budget) had to be provided in separate hospitals from those dispensing paid care. The approximately 55 per cent of very poor people in the country would continue to use the free public hospitals.

23. Child labour was a problem principally found in agriculture, where children from 7 to 10 years old were traditionally used for certain types of farm work. The problem had not yet been resolved, but it was not regarded as exploitation in the generally accepted sense of the term, as the children involved were working for their parents.

24. Ms. GEVORGIAN (Armenia) said she agreed that the Government should devote more attention to sex education for children. A sexual health unit had been established the year before, and sex education would be introduced into the school curricula in 2000. The Government was in the process of preparing sex education manuals.

25. The rate of suicides among young people was very low (0.003 per cent).

26. The criminal courts tried juvenile offenders aged 14 and above. Pre-trial detention of minors took place for only the most serious offences, and a minor could not be held in custody for more than 72 hours. Convicted minors were placed in the Abovian labour rehabilitation camp. The Government did everything in its power to provide them with the best possible conditions of detention and authorized representatives of NGOs to visit the establishment. Children in prison followed conventional school curricula (education was mandatory), took part in manual work and were able to learn a trade.

27. Mr. KAZHOYAN (Armenia) said that breastfeeding was on the rise and that there was a law prohibiting advertisements for milk replacement products. Information campaigns on family planning, aimed at women and families, had recently been launched, but contraception had to be paid for and some families could not afford it.

28. Armenia had not yet developed a nutrition policy, but a social programme and activities by various organizations were aimed at combating child malnutrition.

29. The most disadvantaged families received family allowances and other child support benefits.

30. The Government intended to ensure free medical care for children through the age of 8, and even through the age of 16 for certain illnesses. Dental care was now dispensed on a paid basis, but the State had taken the initiative of opening a free dental hospital for children, with support from the United States Government.

31. Environmental pollution had been a very serious problem at the end of the 1980s, but many polluting factories had since been eliminated and a strict policy had been introduced.

32. Regarding street children, the programme being conducted jointly by the Department of Juvenile Justice of the Ministry of the Interior and the Church of Armenia aimed at restoring children's homes and carrying out a campaign for the eradication of the problem. Most of the children in question returned to their schools and families; the remainder were placed in children's homes.

33. Education was mandatory for eight years. A recent study had shown that illness was not the chief cause of dropping-out of school; some children stopped going to school in order to help their parents by doing farm work, but that was a seasonal problem.

34. Armenia was currently in the process of acceding to the 1993 Hague Convention concerning international adoption.

35. No cases of sex discrimination had been reported. The Armenian people were not at all concerned about the respective percentages of women and men in the different sectors of social life.

36. None of the annual reports of the various organizations contained any reports of violence against children or child abuse.

37. With the support of various organizations, the Armenian Government had undertaken a programme on education for all, aimed in particular at guaranteeing access to school canteens for all pupils without discrimination. It had also launched a safe motherhood programme with the support of UNICEF, which had resulted in a significant drop in the infant and maternal mortality rates.

38. The anatomy textbooks contained sections on health, but there was a definite need for further development of health issues. The age at which sex education should begin had not been determined. There were illustrated texts on the subject, but it was still regarded as taboo in child-parent and pupil-teacher relations.

39. Armenian citizens were required to perform a two-year period of military service beginning at age 18. There was no forced recruitment below the age of 18.

40. The CHAIRPERSON invited the Armenian delegation to reply to the questions asked by the members of the Committee concerning the privatization of health services, free hospitalization through the age of seven, AIDS, measures to improve the health services, control mechanisms for institutions where children were placed, the high number of closures of children's institutions and the possibility for children's agencies to lodge complaints on behalf of institutionalized children.

41. Mr. MARTIROSSIAN (Armenia), referring to the privatization of the health services, said that the reform in progress was aimed at keeping in the public sector a number of free hospitals for those who could not afford to pay and privatizing the remaining establishments. Unfortunately, because of financial constraints, the Government was unable to provide free hospital care for all.

42. Orphanages were under the control of different ministries and could be visited by journalists, respresentatives of associations and other interested individuals on request.

43. Workshops on advanced training and training in new technologies were organized for doctors by specialized institutes, in cooperation with the international organizations.

44. Mrs. MOKHUANE asked how the Government intended to guarantee quality assurance standards in the public hospitals and what measures would be taken to provide marginalized children with access to leisure activities. She would also like to know whether a child's right to survival and development was guaranteed with regard to reproductive health and whether there were policies and programmes aimed at changing attitudes towards disabled children.

45. Mrs. TIGERSTEDT-TAHTELA said that she regretted the lack of statistics on access to drinking water. Noting that there were signs of economic recovery in the country, she asked whether those encouraging results would enable the Government to take more concrete measures to promote children's rights. Generally speaking, she would like to know how the Armenian Government saw the future and what means it intended to use to bring an end to the crisis.

46. Mrs. RILANTONO asked what learning assessment system was applied for primary and secondary education and whether Armenia received aid from the World Bank to improve school attendance and educational quality.

47. Noting that the Armenian Constitution guaranteed the rights of national minorities, she drew attention to the fact that many Yezdi children were not enrolled in school, for economic reasons and because of other children's and teachers' hostility towards them.

48. Mr. RABAH asked whether there were girls among the 82 convicted minors to which reference had been made, and if so, whether prison conditions for them were different than for boys. He would also like to know whether measures were planned to foster the reintegration of young people into society once they had served their sentence and whether children in police stations and temporary detention centres received legal assistance.

49. The CHAIRPERSON asked whether the Government was planning to do more to promote children's participation in decision-making, both within the family and in the highest bodies, for example by establishing a special mechanism. With regard to the school drop-out rate, she asked what specific measures were being taken to encourage children to return to school.

50. Mr. MARTIROSSIAN (Armenia) stressed the fact that, following the break-up of the Soviet Union, Armenia had lost a great number of inhabitants in an earthquake, armed conflicts and the emigration of over 1 million people. The women had remained, and now formed nearly half of the population of working age. Unlike men, they did not hesitate to register for unemployment benefits when they were out of work, which explained the high number of women among the unemployed. The Government was devoting special attention to that issue and was taking measures aimed not only at restoring women's rights, but especially at reintegrating them into the economic life of the country.

51. Much remained to be done to guarantee the quality of health services in the public sector, especially to strengthen training and increase doctors' salaries. There were very few cases of teenage pregnancy, but it was still necessary to think about what might be done, if the problem were to become widespread, to help teenage mothers lead normal lives.

52. Attitudes towards disabled people were beginning to change, and numerous programmes had been undertaken to make life easier for disabled people and to integrate them into society. Disabled children were institutionalized only when there was no other choice.

53. Concerning assessment of students, there were examinations at the end of the primary and secondary levels, or at the conclusion of 8- and 10-year cycles, and at the end of higher studies. It was true that education quality had gone down considerably since the collapse of the Soviet Union. The Government was no longer able to allocate the considerable amounts of money needed for universal and excessively-theoretical education of the type previously provided. It now gave priority to education of a more pragmatic nature, aimed at providing students with specialized training, principally at the university level. A network of private higher education institutions had already been put in place. He noted in that connection that the majority of students were women.

54. The Yezdis' low school enrolment rate was mainly due to the fact that parents in the rural areas where most of the Yezdi, a national minority traditionally made up of herdsman, lived, preferred to keep their children at home to help with work on the family farm. The situation in the cities was different. Yezdi children in the cities were normally enrolled in school and had access to a range of professions. As far as respect for the Yezdis' rights was concerned, he noted that the Armenians had helped the Yezdis to develop an alphabet and to prepare textbooks.

55. Much progress had been achieved in the last 10 years with regard to legal assistance and measures in the legal sphere in general, in particular at the legislative level. Problems persisted, especially in educating the people and informing them of changes, regarding women's and children's issues more particularly. It was important for people to understand that, even if the situation appeared to have worsened since independence, the Government's efforts were democratically-oriented and would be of benefit to all.

56. Ms. GEVORGIAN (Armenia) said that available statistics did not indicate any cases of AIDS among people under 20. It was true that there was a high rate of births among women under 19, but it should be noted that the young women in question were married (the age of marriage being 17). Information and awareness-raising campaigns had been organized on the subject of family planning. Courses in sex education and sexual health were included in the school curricula. With regard to safe motherhood, there had been no reported cases of maternal mortality among women under 19 years of age in the last three years.

57. Mr. KAZHOYAN (Armenia) said that the representatives of ministries, NGOs, human rights organizations and international organizations in Erevan regularly visited orphanages and other institutions where children were placed, including prisons, and that no complaints had so far been received from agencies having requested to visit or inspect such establishments.

58. Finally, the ministries questioned about the closing of 30 to 50 per cent of children's institutions mentioned by Mrs. Sardenberg had indicated that no such measure was planned.

59. The quality of hospital care was monitored through regular inspections by Ministry of Health officials. In case of failure to meet criteria, the funding of public hospitals was suspended

and the licences of private hospitals were withdrawn. Similarly, all doctors were required to take an examination before practising in a public or private hospital, even if they had been practising privately for years.

60. Although Armenian wages were very low, children's participation in cultural activities or sport was not really a problem considering the low fees charged and the possibility of reduced fees for the poorest families.

61. There had been a marked increase in awareness of the need for access facilities for the disabled. The design of access facilities for the disabled at the United Nations offices had been a turning point, and the practice was becoming widespread.

62. It was true that the water supply system was obsolete and too small for the population it served. However, he had no knowledge of water pollution problems in Armenia.

63. Yezdi children worked in the fields and did in fact miss class during the harvest season. However, the Yezdi minority was now much better accepted and integrated than it had been in 1995, when the report had been drafted.

64. Juvenile offenders, who were mostly boys, were able to choose a counsel with the help of their parents or be assigned a lawyer by the court, just like adults. After they left the rehabilitation centres they were no longer required, as they had been under the old system, to report regularly to the police, but the care centres were responsible for periodically checking to see whether they were still attending school, kept contact with their families, and, generally speaking, were becoming reintegrated into society.

65. There was unfortunately no structure responsible for promoting school attendance and combating the tendency to drop out of school. However, there was a newspaper specifically for children in which children could express themselves freely about school and the decisions taken there, and, although children were completely free to write to any newspaper, they generally preferred to express their opinions through the children's newspaper and children's television programmes.

66. Despite the consequences of the 1988 earthquake and the blockade, after a difficult transition period the economic indicators in the agricultural and industrial sectors were tending to improve and some infrastructures had been restored. Children's institutions were now provided with electricity 24 hours a day, as opposed to one hour a day during the period from 1992 to 1994.

67. Relations with NGOs were constantly improving and the process of raising awareness of children's rights was advancing.

68. Mrs. SARDENBERG said that, given the immensity of the task, she would like to know the Government's priority in the area of human rights.

69. Mrs. MOKHUANE asked whether statistics had been established on tobacco consumption among young people and whether programmes were being set up to combat smoking.

70. She noted with regret that drug abuse was dealt with exclusively as an offence, with no account taken of the health aspect of the problem, and asked whether the Armenian Government intended to confine itself to a punitive policy.

71. According to information from outside sources, a policy existed for the reinsertion of persons with physical disabilities, but persons with psychological disabilities were regarded as dangerous and the policy towards them was one of exclusion. She would appreciate clarifications in that connection.

72. Lastly, she would be glad to have additional information on the extent to which the school curricula prepared pupils for life in society.

73. Mr. KAZHOYAN (Armenia) said that the establishment of a national body responsible for ensuring the implementation of the Convention and advising the Government on children's policy was one of the most important priorities.

74. To his knowledge there were no statistics on the number of children who smoked, but there was no doubt that Armenians were a nation of smokers. Despite television and poster campaigns, moreover, the situation appeared to be worsening, both in Armenia and in many other countries in transition throughout the region. Cigarette manufacturers regarded those countries as promising markets and had begun an unequal battle with States, which had far less resources for prevention campaigns than the manufacturers had for advertising campaigns.

75. In its efforts to combat drug abuse the Government combined medical treatment and punishment, and had thus achieved some very good results. It maintained good relations with the United Nations International Drug Control Programme and had launched a regional cooperation programme together with Iran and Georgia to combat the transboundary drug traffic. Training sessions in combating the clandestine introduction of drugs into the territory were organized regularly for customs personnel, and seizures of locally-produced illicit substances were common.

76. Lastly, children's preparation for their future lives as members of society began at the primary school level, through practical work focusing on do-it-yourself for boys and sewing and cooking for girls. Citizenship education courses were added at the secondary level.

77. The CHAIRPERSON thanked the delegation for its replies and invited Mrs. Sardenberg to present her preliminary conclusions.

78. Mrs. SARDENBERG (Country Rapporteur) recommended that Armenia should conduct a study of the implementation of the principle of respect for the best interests of the child and should consider raising the age of criminal responsibility.

79. Concerned at the traditional image of children within the family, she stressed the need to educate parents and encouraged Armenia to continue its efforts to combat ill-treatment and abuse.

80. With regard to institutionalization, she noted the importance of article 25 of the Convention concerning periodic review of placement, and invited the Government to consult other Governments and NGOs to learn from their experience in that area.

81. Concerning special protection measures, she said that special attention should be given to disadvantaged children, orphans and abandoned children. There was also a need to conduct studies on children traumatized by armed conflicts and on street children and child labour. The juvenile justice system should also be brought into conformity with the standards contained in the Convention.

82. She agreed that one of the State party's priorities should be to establish a national body with real political weight to monitor the implementation of the Convention. The data collection system should also be improved, for which the Government might ask for international cooperation.

83. It would also be useful to organize public awareness-raising campaigns, in closer cooperation with NGOs, and to introduce a national plan of action and a system for evaluating the repercussions on children of each measure envisaged by the Government, in order to give greater political visibility to children's rights issues.

84. Mr. NAZARIAN (Armenia) said that he had taken note of Mrs. Sardenberg's preliminary observations and that the Committee's conclusions and recommendations would be duly taken into consideration by the Armenian Government when preparing its future policies.

85. The CHAIRPERSON said that Governments could do much to help change attitudes and that the Convention was a valuable reference tool to that end.

The meeting rose at 6.05 p.m.